Debtor 1	Stephen C. DeM	lascio		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTRICT		
(II KIIOWII)				☐ Check if this is an amended filing

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	213,400.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	53,524.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	266,924.00
Pa	t 2: Summarize Your Liabilities		
			iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	149,668.40
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	21,519.74
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	61,339.29
	Your total liabilities	\$	232,527.43
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	15,124.74
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	9,440.70
Pa	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$\_\_\_\_\_18,383.71

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	nim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	21,519.74
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	21,519.74

			Sylv page	al: Lot number 21 in Convent Plac rania, Lucas County, Ohio, in acco e 51. cel No. 8215067; Assessor's Valua	ordance with Volum	
				At least one of the debtors and another r information you wish to add about this ite erty identification number:	(see instructions) m, such as local	
County				200101 1 4114 200101 2 0111)		mmunity property
Lucas						
_				Debtor 1 only	Fee Simple	
			_	has an interest in the property? Check one	a life estate), if known	
				Timeshare Other		your ownership interest enancy by the entireties, o
City	State	ZIP Code		Investment property	\$213,400.00	\$213,400.0
Sylvania		43560-2865		Land	entire property?	portion you own?
				Manufactured or mobile home	Current value of the	Current value of the
				Condominium or cooperative		, ,
Street addre	ss, if available, or other des	cription		Duplex or multi-unit building		red claims on Schedule D: aims Secured by Property.
	anciscan Blvd	and the co		Single-family home		claims or exemptions. Put
I.1			What	is the property? Check all that apply		
100. 111101	o to the property.					
_	e is the property?					
□ No. Go to F	, , ,		,	5, a,		
				ence, building, land, or similar property?		
nswer every qu	estion.	·		Estate You Own or Have an Interest In	,	(,
ink it fits best.	Be as complete and a	accurate as possibl	le. If two	only once. If an asset fits in more than one married people are filing together, both are his form. On the top of any additional pages	equally responsible for	supplying correct
<u>3ched</u> ı	ile A/B: Pi	roperty				12/15
Official F	orm 106A/E	<u>3</u>				
Case number	22-30106					☐ Check if this is a amended filing
Jnited States	Bankruptcy Court for	the: NORTHER	N DIST	RICT OF OHIO		
Spouse, if filing)	First Name		e Name	Last Name		
Debtor 2	First Name	Middle	e Name	Last Name		
		DeMascio				
Debtor 1	Stanban C I					

Part 2: Describe Your Vehicle

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debte	or 1 <b>S</b>	tephen C. DeMascio		Case number (if known)	22-30106	
3. <b>Ca</b>	rs, vans,	trucks, tractors, sport utility ve	chicles, motorcycles			
	NI.					
_						
•	Yes					
3.1	Make:	Nissan	Who has an interest in the property? Check one		ed claims or exemptions. Put	
0	Model:	240SX	■ Debtor 1 only		cured claims on Schedule D: Claims Secured by Property.	
	Year:	1993	Debtor 2 only			
		nate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
		ormation:	☐ At least one of the debtors and another	,		
	19 year	r old Son's vehicle. Held			_	
		tor's name for insurance	☐ Check if this is community property	\$1,600.0	0 \$1,600.00	
		ses. Currently not	(see instructions)			
	operab	nie.				
3.2	Make:	ATV	Who has an interest in the property? Check one		ed claims or exemptions. Put	
	Model: Yamaha		■ Debtor 1 only	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
	Year:	2007	Debtor 2 only	Current value of the	Comment value of the	
	Approxim	nate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other information:		☐ At least one of the debtors and another			
				<b>#500.0</b>		
			Check if this is community property (see instructions)	\$500.0	<u> </u>	
			(see instructions)			
3.3	Make:	Chevrolet	Who has an interest in the property? Check one		ed claims or exemptions. Put	
0.0	Model:	Traverse LTZ	■ Debtor 1 only		cured claims on Schedule D: Claims Secured by Property.	
	Year:	2014	Debtor 2 only			
		nate mileage: 150,000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
		ormation:	☐ At least one of the debtors and another		, ,	
			Check if this is community property (see instructions)	\$8,700.0	<u>\$8,700.00</u>	
			(see instructions)			
3.4	Make:	BMW	Who has an interest in the property? Check one		ed claims or exemptions. Put	
	Model:	335i	■ Debtor 1 only		cured claims on Schedule D: Claims Secured by Property.	
	Year:	2007	Debtor 2 only			
		nate mileage: 175000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
		ormation:	☐ At least one of the debtors and another			
	Son's v	/ehicle. In Debtor's name				
	for ins	urance purposes only.	☐ Check if this is community property (see instructions)	\$2,400.0	92,400.00	
3.5	Make:	Volkswagen	Who has an interest in the property? Check one	Do not deduct secure	ed claims or exemptions. Put	
		Tiguan Wolfsburg	<b>=</b>	the amount of any se	cured claims on Schedule D:	
	Model:	Edition	Debtor 1 only	Creators Who Have	Claims Secured by Property.	
	Year:	2017	Debtor 2 only	Current value of the		
		nate mileage: 58,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		ormation:	At least one of the debtors and another			
		ter's vehicle. Held in of Debtor for insurance	☐ Check if this is community property	\$15,000.0	0 \$15,000.00	
	purpos		(see instructions)	·		

N				
Υ	Make: Chevrolet Tahoe	Who has an interest in the property? Check one  Debtor 1 only		laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	/ear: 2004 approximate mileage: 175,000 Other information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
1 -	on's car. Titled in Debtor's ame for insurance purposes.	☐ Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
	Make: Chevrolet Silverado	Who has an interest in the property? Check one  Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
	'ear: <b>2001</b>	Debtor 2 only	Current value of the	Current value of the
	approximate mileage: 280,000 Other information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
S la n	ion's vehcile. Used for son's awn business. In Debtor's ame for inusrance purposes nly. Needs body work.	Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
.page Part 3:	es you have attached for Part 2. Write  Describe Your Personal and Household I	vn for all of your entries from Part 2, including an that number here		\$31,200.00
	own or have any legal or equitable in	tems nterest in any of the following items?		Current value of the
	, , ,		1	Current value of the portion you own? Do not deduct secured claims or exemptions.
Exan	ehold goods and furnishings nples: Major appliances, furniture, linen	nterest in any of the following items?	1	portion you own? Do not deduct secured
Exan	ehold goods and furnishings nples: Major appliances, furniture, linen o es. Describe	nterest in any of the following items?	1	portion you own? Do not deduct secured claims or exemptions.
Exan	ronics  Inples: Televisions and radios; audio, vicinity in process.	nterest in any of the following items?  s, china, kitchenware  furniture, fixtures, household goods and  deo, stereo, and digital equipment; computers, printer		portion you own? Do not deduct secured claims or exemptions.  \$2,000.00
Exan	mehold goods and furnishings mples: Major appliances, furniture, linences.  Describe  Miscellaneous appliances.  ronics mples: Televisions and radios; audio, vic including cell phones, cameras, including cell phones.	s, china, kitchenware  furniture, fixtures, household goods and  deo, stereo, and digital equipment; computers, printermedia players, games	rs, scanners; music collecti	portion you own? Do not deduct secured claims or exemptions.  \$2,000.00

Debto	or 1 Stephen C.	DeMascio	Case number (if known)	22-30106
	uipment for sports a camples: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes	and kayaks; carpentry tools;
	No Yes. Describe			
-	•	s, shotguns, ammunition, and related equipment		
	Yes. Describe			
		4 Pistols 2 Rifles & 2 Shotguns		\$3,000.00
		othes, furs, leather coats, designer wear, shoes, accessories		
		Wearing apparel & personal effects		\$600.00
		welry, costume jewelry, engagement rings, wedding rings, heirloom	jewelry, watches, gems, g	old, silver
		Miscellaneous Jewelry / 2 watches		\$100.00
	on-farm animals Examples: Dogs, cats, No Yes. Describe	birds, horses		
		2 Dogs		\$0.00
15.	No Yes. Give specific in  Add the dollar value for Part 3. Write that	of all of your entries from Part 3, including any entries for page number here	·	\$6,700.00
		egal or equitable interest in any of the following?		Current value of the
				portion you own? Do not deduct secured claims or exemptions.
	Examples: Money you No	have in your wallet, in your home, in a safe deposit box, and on han	d when you file your petiti	on
			Cash	\$0.00
			Cash	\$1,200.00

Deb	otor 1	Stephen C.	DeMasc	io		Case number (if known)	22-30106
17.					certificates of deposit; shares in the same institution, list each.	credit unions, brokerage h	nouses, and other similar
_	□ No				Institution name:		
	Yes						
			17.1.	Checking Account	Directions Credit Union ending 216		\$0.00
			17.2.	Savings Account	Directions Credit Union ending 216		\$5.00
				cly traded stocks ent accounts with brokera	ge firms, money market accounts	5	
				Institution or issuer name	e:		
	joint vo ⊒ No =	enture		·	d and unincorporated busines	ses, including an interes	t in an LLC, partnership, and
	■ Yes.	Give specific in		about them me of entity:		% of ownership:	
			No Se	ountain Star Transpor longer operating. ccretary of State cand 3-2006.		%	\$0.00
ı	Negotia Non-ne ■ No	able instrument	ts include periods to the transfer to the tran	personal checks, cashiers those you cannot transfer	e and non-negotiable instrume ' checks, promissory notes, and i to someone by signing or delive	money orders.	
_		nent or pensio les: Interests in			), thrift savings accounts, or other	r pension or profit-sharing	plans
	☐ Yes. I	List each accou		tely. of account:	Institution name:		
	Your sl		ed deposi	ts you have made so that	you may continue service or use c utilities (electric, gas, water), tel		nies, or others
_	_				Institution name or individual:		
23.	Annuiti	ies (A contract	for a perio	dic payment of money to	you, either for life or for a number	r of years)	
	■ No □ Yes	ı	ssuer nam	ne and description.			
				•	ed ABLE program, or under a c	nualified state tuition pro	ogram
2		C. §§ 530(b)(1)			ou 7.522 program, or under a c	quamou state tallion pre	·9. u
_	■ No I Yes	1	nstitution r	name and description. Se	parately file the records of any int	terests.11 U.S.C. § 521(c):	
	_ `	equitable or f	uture inte	rests in property (other	than anything listed in line 1), a	and rights or powers exe	ercisable for your benefit
	■ No □ Yes.	Give specific ir	nformation	about them			

D	Stepnen C. Delviascio		ase number (if known) 22	-30106
26.	Examples: Internet domain names, we	de secrets, and other intellectual property bsites, proceeds from royalties and licensing agreement	is	
	<ul><li>■ No</li><li>□ Yes. Give specific information about</li></ul>	them		
27.	Licenses, franchises, and other gene		es professional licenses	
	■ No		cs, professional neorises	
	☐ Yes. Give specific information about	them		
M	oney or property owed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you ☐ No			
	■ Yes. Give specific information about	them, including whether you already filed the returns and	d the tax years	
		2019 and 2021 State of Illinois	State	\$5,800.00
			•	
		2019 Federal	   Federal	\$3,921.00
		2019 reueiai	rederal	φ3,921.00
		2020 Federal	Federal	\$4,698.00
29.	Family support  Examples: Past due or lump sum alimo  ■ No  □ Yes. Give specific information	ony, spousal support, child support, maintenance, divord	e settlement, property sett	lement
30.	Other amounts someone owes you  Examples: Unpaid wages, disability ins benefits; unpaid loans you  No  Yes. Give specific information	surance payments, disability benefits, sick pay, vacation made to someone else	pay, workers' compensati	on, Social Security
		Commissions from employment		Unknown
31.	Interests in insurance policies  Examples: Health, disability, or life insu  ■ No  □ Yes. Name the insurance company of Company	urance; health savings account (HSA); credit, homeown		Surrender or refund value:
32.	Any interest in property that is due y If you are the beneficiary of a living tru- someone has died.	ou from someone who has died st, expect proceeds from a life insurance policy, or are c	urrently entitled to receive	property because
	■ No □ Yes. Give specific information			
33.		or not you have filed a lawsuit or made a demand foutes, insurance claims, or rights to sue	or payment	
Ott	Yes. Describe each claim	Schodulo A/D: Drossett		222
Uff	icial Form 106A/B	Schedule A/B: Property		page 6

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Best Case Bankruptcy

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Debtor	1 Stephen C. DeMascio		Case number (if known)	22-30106
34 <b>Ot</b> l	ner contingent and unliquidated claims of every nature, inclu	ıdıng counterclaims (	of the debtor and rights to	set off claims
J-i. <b>U.</b> . ■ N		iamig counterclaims	or the debtor and rights to	Set on diamis
_	es. Describe each claim			
_	y financial assets you did not already list			
■ N				
ים	es. Give specific information			
36. <b>A</b>	dd the dollar value of all of your entries from Part 4, includin	g any entries for pag	ies vou have attached	
	r Part 4. Write that number here			\$15,624.00
	_			
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	est In. List any real esta	ate in Part 1.	
37. <b>Do</b> <u>1</u>	ou own or have any legal or equitable interest in any business-relate	ed property?		
■ No	o. Go to Part 6.			
☐ Ye	es. Go to line 38.			
D. 40	In., 1. A. F	•		
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st in.	
				<del></del> -
_	you own or have any legal or equitable interest in any farm-	or commercial fishin	ig-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
53 <b>Do</b>	you have other property of any kind you did not already list	2		
	amples: Season tickets, country club membership	•		
	lo			
	es. Give specific information			
54. <b>A</b>	dd the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
	<u></u>			
Part 8:	List the Totals of Each Part of this Form			
55. <b>P</b>	art 1: Total real estate, line 2			\$213,400.00
	art 2: Total vehicles, line 5	\$31,200.00		
	art 3: Total personal and household items, line 15	\$6,700.00		
	art 4: Total financial assets, line 36	\$15,624.00		
59. <b>P</b>	art 5: Total business-related property, line 45	\$0.00		
	art 6: Total farm- and fishing-related property, line 52	\$0.00		
	art 7: Total other property not listed, line 54 +	\$0.00		
62. <b>T</b>	otal personal property. Add lines 56 through 61	\$53,524.00	Copy personal property to	otal \$53,524.00
63 <b>T</b>	otal of all property on Schedule A/B. Add line 55 + line 62			¢266 024 00
JJ. I	Mai of all property of ochedule Mb. Add life 55 + IIIIe 62			\$266,924.00
			J	

Fill in this infor	rmation to identify your	case:		
Debtor 1	Stephen C. DeMa	scio		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number	22-30106			
(if known)				☐ Check if this is an
				amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identity the Property You Claim as Exempt	

Pa	rt 1: Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	5119 Franciscan Blvd Sylvania, OH	\$213,400.00		\$45,420.42	Ohio Rev. Code Ann. §				
	43560-2865 Lucas County Legal: Lot number 21 in Convent Place, a Subdivision in the City of Sylvania, Lucas County, Ohio, in accordance with Volume 59 of Plats, page 51. Parcel No. 8215067; Assessor's Valuation given. Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2329.66(A)(1)				
	1993 Nissan 240SX	\$1,600.00		\$1,600.00	Excluded from estate. 11 U.S.C. section 541(d).				
	19 year old Son's vehicle. Held in Debtor's name for insurance purposes. Currently not operable. Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	U.S.C. Section 341(a).				
	2014 Chevrolet Traverse LTZ 150,000 miles	\$8,700.00		\$4,000.00	Ohio Rev. Code Ann. § 2329.66(A)(2)				
	Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit	2323.00(A)(2)				
	2007 BMW 335i 175000 miles Son's vehicle. In Debtor's name for	\$2,400.00	•	\$2,400.00	Excluded from estate. 11 U.S.C. section 541(d).				
	insurance purposes only. Line from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	5.5.5. 355tion 54 (ta).				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

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tor 1 Stephen C. DeMascio			Case number (if known)	22-30106
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2017 Volkswagen Tiguan Wolfsburg Edition 58,000 miles	\$15,000.00		\$15,000.00	Excluded from estate. 11 U.S.C. section 541(d).
Daughter's vehicle. Held in name of Debtor for insurance purposes. Line from <i>Schedule A/B</i> : 3.5			100% of fair market value, up to any applicable statutory limit	,
2004 Chevrolet Tahoe 175,000 miles Son's car. Titled in Debtor's name	\$2,000.00		\$2,000.00	Excluded from estate. 11 U.S.C. section 541(d).
for insurance purposes. Line from <i>Schedule A/B</i> : <b>3.6</b>			100% of fair market value, up to any applicable statutory limit	0.0.0.0.00.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0
2001 Chevrolet Silverado 280,000 miles	\$1,000.00		\$1,000.00	Excluded from estate. 11 U.S.C. section 541(d).
Son's vehcile. Used for son's lawn business. In Debtor's name for inusrance purposes only. Needs body work.  Line from Schedule A/B: 3.7			100% of fair market value, up to any applicable statutory limit	
Miscellaneous, furniture, fixtures,	\$2,000.00		\$2,000.00	Ohio Rev. Code Ann. §
ousehold goods and appliances. ne from <i>Schedule A/B</i> : <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)
Various electectornics including T.V.'s, Stereo, DVD's players,	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Computers and cell phones. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
4 Pistols 2 Rifles & 2 Shotguns Line from Schedule A/B: 10.1	\$3,000.00		\$3,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
			100% of fair market value, up to any applicable statutory limit	· // //
Wearing apparel & personal effects Line from Schedule A/B: 11.1	\$600.00		\$600.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
			100% of fair market value, up to any applicable statutory limit	The second secon
Miscellaneous Jewelry / 2 watches Line from Schedule A/B: 12.1	\$100.00		\$500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
			100% of fair market value, up to any applicable statutory limit	
2 Dogs Line from <i>Schedule A/B</i> : <b>13.1</b>	\$0.00		\$2.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
			100% of fair market value, up to any applicable statutory limit	· · · · · · · · · · · · · · · · · ·
Cash Line from Schedule A/B: 16.1	\$0.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
			100% of fair market value, up to any applicable statutory limit	(7)(-)
Cash Line from Schedule A/B: 16.2	\$1,200.00	•	\$50.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
			100% of fair market value, up to any applicable statutory limit	(- <del>'/(-'</del> /

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 3

Official Form 106C

Yes

Schedule C: The Property You Claim as Exempt

Fill in this information t	o identify you	case:			
Debtor 1 Ster	ohen C. DeMa	ascio			
First N		Middle Name Last Name		-	
Debtor 2 (Spouse if, filing) First N	Name	Middle Name Last Name		-	
United States Bankruptcy	y Court for the:	NORTHERN DISTRICT OF OHIO		_	
Case number	06				
(if known)				_	if this is an
				amend	ded filing
Official Form 106	D				
		Who Have Claims Secure	d by Propert	v	12/15
		Time trate diamine decare.	<u></u>	<del>J</del>	
		two married people are filing together, both are edut, number the entries, and attach it to this form. O			
1. Do any creditors have cla	aims secured by	your property?			
☐ No. Check this bo	x and submit th	is form to the court with your other schedules. Y	ou have nothing else	to report on this form.	
■ Yes. Fill in all of th		•	ŭ	,	
		Clow.			
Part 1: List All Secur	ed Claims		Column A	Column B	Column C
for each claim. If more than	one creditor has	ore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As al order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Chrysler Capital		Describe the property that secures the claim:	\$5,242.15	\$8,700.00	\$0.00
Creditor's Name		2014 Chevrolet Traverse LTZ 150,000 miles	.,		·
PO Box 660335 Dallas, TX 75266	) S	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, Stat	e & Zip Code	■ Unliquidated □ Disputed			
Who owes the debt? Che	ck one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		■ An agreement you made (such as mortgage or see	cured		
Debtor 2 only		car loan)			
Debtor 1 and Debtor 2 or	nly	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtor	rs and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim rela	tes to a	Other (including a right to offset)			

Official Form 106D

☐ Check if this claim relates to a community debt

Date debt was incurred

Schedule D: Creditors Who Have Claims Secured by Property

Last 4 digits of account number 8186

page 1 of 3

	lame Last Name	Case number (if known)	22-30106	
2.2 Ohio Attorney General	Describe the property that secures the claim:	\$31,883.44	\$213,400.00	\$0.00
Creditor's Name  Collections Enforcement Section Attention: Bankruptcy Unit 30 East Broad St., 14th Floor Columbus, OH 43215	5119 Franciscan Blvd Sylvania, OH 43560-2865 Lucas County Legal: Lot number 21 in Convent Place, a Subdivision in the City of Sylvania, Lucas County, Ohio, in accordance with Volume 59 of Plats, page 51. Parcel No. 8215067; Assessor's V As of the date you file, the claim is: Check all that apply.  Contingent		\$213, <del>400.00</del>	
Number, Street, City, State & Zip Code	■ Unliquidated			
Who owes the debt? Check one.  Debtor 1 only	☐ Disputed  Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or	r secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Statutory lien (such as tax lien, mechanic's lier ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	n)		
2001,2007, 2013, 2015, 2006, 2005		rious Tax ns in Lucas u		
2.3 Servicing Corporation	Describe the property that secures the claim:	\$112,542.81	\$213,400.00	\$0.00
Creditor's Name  323 5th Street Eureka, CA 95501	5119 Franciscan Blvd Sylvania, OH 43560-2865 Lucas County Legal: Lot number 21 in Convent Place, a Subdivision in the City of Sylvania, Lucas County, Ohio, in accordance with Volume 59 of Plats, page 51. Parcel No. 8215067; Assessor's V  As of the date you file, the claim is: Check all that apply.  ☐ Contingent ■ Unliquidated			
Number, Street, City, State & Zip Code	☐ Disputed			
Number, Street, City, State & Zip Code	The state of the s			
Number, Street, City, State & Zip Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Nature of lien. Check all that apply.  ■ An agreement you made (such as mortgage or car loan)  □ Statutory lien (such as tax lien, mechanic's lien □ Judgment lien from a lawsuit □ Other (including a right to offset)			

use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 3

Debto	or 1 Stephen C. I	DeMascio		Case number (if known) 22-30106
	First Name	Middle Name	Last Name	
[]	Chrysler Capita			On which line in Part 1 did you enter the creditor? 2.1
	PO Bvox 66033 Dallas, TX 7526	•		Last 4 digits of account number
[]	Name, Number, Stre Ohio Departme Attn: Bankrupt P.O. Box 530 Columbus, OH	cy Division		On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
[]		Avenue		On which line in Part 1 did you enter the creditor?  Last 4 digits of account number
[]	<b>US Bank Trust</b>	galow Series IV Trust n Drive		On which line in Part 1 did you enter the creditor? 2.3  Last 4 digits of account number 4107

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Fill in this infor	rmation to identify your	case:				
Debtor 1	Stephen C. DeMa	scio				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO			
Case number	22-30106					
(if known)					_	if this is an
					amend	led filing
Official For	m 106F/F					
	E/F: Creditors W	ho Have Unsec	ured Claims			12/15
Be as complete a	nd accurate as possible. Us	e Part 1 for creditors with	PRIORITY claims and Part 2 fo	or creditors with NON	PRIORITY claims, Li	ist the other party to
ame and case nu	ontinuation Page to this pag umber (if known). All of Your PRIORITY Un	·	ion to report in a Part, do not f	lie that Part. On the to	op of any additional	pages, write your
1. Do anv credi	tors have priority unsecure	d claims against you?				
☐ No. Go to	• •					
Yes.						
<ol><li>List all of you identify what t possible, list t</li></ol>	type of claim it is. If a claim ha	s both priority and nonpriorier according to the creditor's	n one priority unsecured claim, lis ty amounts, list that claim here a name. If you have more than tw creditors in Part 3.	and show both priority a	nd nonpriority amoun	ts. As much as
(For an explai	nation of each type of claim, s	ee the instructions for this f	orm in the instruction booklet.)			
				Total claim	Priority amount	Nonpriority amount
	scio, Sandra L.	Last 4 digits	of account number	\$0.00	\$0.00	\$0.00
5023 B	Creditor's Name Borland Dr Nia, OH 43560-2611	When was th	e debt incurred?			
	Street City State Zip Code	As of the date	e you file, the claim is: Check a	all that apply		
Who incurre	ed the debt? Check one.	☐ Contingen	t			
Debtor 1	only	■ Unliquidate	ed			
Debtor 2	only	☐ Disputed				
Debtor 1	and Debtor 2 only	Type of PRIO	RITY unsecured claim:			
☐ At least of	one of the debtors and anothe	Pr Domestic	support obligations			
☐ Check if	this claim is for a commur	nity debt  Taxes and	certain other debts you owe the	government		
Is the claim	subject to offset?		death or personal injury while yo			
■ No		Other. Spe	ecify			
☐ Yes		-1	Child Support. Non	e in arrears		-

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 11

1 - 4 4 10 10 4	0040	A4 40F 45	64 405 10	<b>^</b> -
Last 4 digits of account number	9216	\$1,105.18	\$1,105.18	\$0.0
When was the debt incurred?	9/30/2004 and When was the debt incurred? 12/31/2004			
As of the date you file, the claim	is: Check all that	apply		
☐ Contingent				
Unliquidated				
☐ Disputed				
Type of PRIORITY unsecured cla	im:			
☐ Domestic support obligations				
Taxes and certain other debts y	ou owe the gove	rnment		
Claims for death or personal inj	ury while you wer	e intoxicated		
Other. Specify				
Civil Penal	ties Withhole	ding		
Last 4 digits of account number		\$15,622.00	\$15,622.00	\$0.0
When was the debt incurred?	12/31/2012, 12/31/2015	12/31/2013,		
As of the date you file, the claim	is: Check all that	apply		
☐ Contingent				
Unliquidated				
☐ Disputed				
Type of PRIORITY unsecured cla	im:			
☐ Domestic support obligations				
Taxes and certain other debts y	ou owe the gove	rnment		
	=			
Other. Specify				
Last 4 digits of account number	0662	\$1,105.18	\$1,105.18	\$0.0
When was the debt incurred?	2004			
As of the date you file, the claim	is: Check all that	apply		
☐ Contingent				
Unliquidated				
☐ Disputed				
Type of PRIORITY unsecured cla	im:			
☐ Domestic support obligations				
Taxes and certain other debts y	ou owe the gove	rnment		
	_			
Пои о и				
	When was the debt incurred?  As of the date you file, the claim    Contingent   Unliquidated   Disputed Type of PRIORITY unsecured claim   Claims for death or personal inj   Other. Specify   Civil Penal   Last 4 digits of account number   When was the debt incurred?   As of the date you file, the claim   Contingent   Unliquidated   Disputed Type of PRIORITY unsecured claim   Claims for death or personal inj   Other. Specify   Civil Penal   Unliquidated   Disputed   Domestic support obligations   Taxes and certain other debts your claim of the date you file, the claim of the date your file, the claim of the debt incurred?   As of the date you file, the claim of the date your file, the claim of the your file, the	Last 4 digits of account number 9/30/2004 at 12/31/2004  As of the date you file, the claim is: Check all that Contingent  Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations  Taxes and certain other debts you owe the gover Claims for death or personal injury while you were Claims for death or personal injury while you were 12/31/2015  As of the date you file, the claim is: Check all that Contingent  Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations  Taxes and certain other debts you owe the gover Claims for death or personal injury while you were Claims for death or personal injury while you were Claims for death or personal injury while you were Claims for death or personal injury while you were Claims for death or personal injury while you were Contingent  Unliquidated Disputed Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations  Taxes and certain other debts you owe the government of PRIORITY unsecured claim: Domestic support obligations  Taxes and certain other debts you owe the government of PRIORITY unsecured claim: Domestic support obligations  Taxes and certain other debts you owe the government of PRIORITY unsecured claim: Domestic support obligations	Last 4 digits of account number    930/2004 and   12/31/2004	When was the debt incurred?    9/30/2004 and   12/31/2004

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 11

Debtor 1 Stephen C. DeMascio		Case num	ber (if known)	22-30106	
Ohio Department Of Taxation	Last 4 digits of account number	0662	\$3,687.38	\$3,687.	38 \$0.00
Priority Creditor's Name  Attn: Bankruptcy Division	When was the debt incurred?	2003/2004		_	
PO Box 530 Columbus, OH 43266-0001					
Number Street City State Zip Code	As of the date you file, the claim	is: Check all th	at apply		
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	Unliquidated				
☐ Debtor 2 only	Disputed				
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	you owe the go	/ernment		
Is the claim subject to offset?	Claims for death or personal inj	_			
No	Other. Specify	,. , , ,			
Yes		ng assessed	d for Mountain	n Star	
	Transport	Incorporate	ed.		
	ns against you?	schedules.			
<ul> <li>Do any creditors have nonpriority unsecured clair</li> <li>□ No. You have nothing to report in this part. Submit</li> <li>■ Yes.</li> </ul>	ns against you? this form to the court with your other see alphabetical order of the creditor claim. For each claim listed, identify when the credit is the court with the credit or claim.	who holds eac hat type of clain	n it is. Do not list cl	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of
<ul> <li>3. Do any creditors have nonpriority unsecured clair</li> <li>No. You have nothing to report in this part. Submit</li> <li>Yes.</li> <li>4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other</li> </ul>	ns against you? this form to the court with your other see alphabetical order of the creditor claim. For each claim listed, identify when the credit is the court with the credit or claim.	who holds eac hat type of clain	n it is. Do not list cl	aims already includ laims fill out the Co	led in Part 1. If more
<ol> <li>Do any creditors have nonpriority unsecured clair         No. You have nothing to report in this part. Submit     </li> <li>Yes.</li> <li>List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.</li> <li>Boyd, Esq., Kenneth E.</li> </ol>	ns against you? this form to the court with your other see alphabetical order of the creditor claim. For each claim listed, identify when the credit is the court with the credit or claim.	who holds eac hat type of clain than three nonp	n it is. Do not list cl	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
<ul> <li>3. Do any creditors have nonpriority unsecured clair</li> <li>No. You have nothing to report in this part. Submit</li> <li>Yes.</li> <li>4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2.</li> <li>4.1 Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300</li> </ul>	e alphabetical order of the creditor claim. For each claim listed, identify will recreditors in Part 3.If you have more to	who holds eac hat type of clain than three nonp per	n it is. Do not list cl	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
<ul> <li>3. Do any creditors have nonpriority unsecured clair</li> <li>No. You have nothing to report in this part. Submit</li> <li>Yes.</li> <li>4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2.</li> <li>4.1 Boyd, Esq., Kenneth E.</li> <li>Nonpriority Creditor's Name</li> </ul>	ns against you? this form to the court with your other sealphabetical order of the creditor claim. For each claim listed, identify wird creditors in Part 3.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part 4.If you have more to the creditors in Part	who holds eac hat type of clain than three nonp per	n it is. Do not list cl riority unsecured o	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
<ul> <li>3. Do any creditors have nonpriority unsecured clair  No. You have nothing to report in this part. Submit  Yes.</li> <li>4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the othe Part 2.</li> <li>4.1 Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300 Toledo, OH 43604-1106</li> </ul>	e alphabetical order of the creditor claim. For each claim listed, identify wir creditors in Part 3.If you have more to tast 4 digits of account numbers.	who holds eac hat type of clain than three nonp per	n it is. Do not list cl riority unsecured o	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
<ul> <li>3. Do any creditors have nonpriority unsecured clair  No. You have nothing to report in this part. Submit  Yes.</li> <li>4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.</li> <li>4.1 Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300  Toledo, OH 43604-1106  Number Street City State Zip Code</li> </ul>	e alphabetical order of the creditor claim. For each claim listed, identify wir creditors in Part 3.If you have more to tast 4 digits of account numbers.	who holds eac hat type of clain than three nonp per	n it is. Do not list cl riority unsecured o	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
3. Do any creditors have nonpriority unsecured clair  □ No. You have nothing to report in this part. Submit  ■ Yes.  4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  4.1  Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300  Toledo, OH 43604-1106  Number Street City State Zip Code  Who incurred the debt? Check one.	e alphabetical order of the creditor claim. For each claim listed, identify wire creditors in Part 3.If you have more to the Last 4 digits of account number when was the debt incurred?  As of the date you file, the claim.	who holds eac hat type of clain than three nonp per	n it is. Do not list cl riority unsecured o	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
3. Do any creditors have nonpriority unsecured clair  No. You have nothing to report in this part. Submit  Yes.  4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  4.1  Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300  Toledo, OH 43604-1106  Number Street City State Zip Code  Who incurred the debt? Check one.  □ Debtor 1 only	e alphabetical order of the creditor claim. For each claim listed, identify wire creditors in Part 3.If you have more to the was the debt incurred?  As of the date you file, the claim contingent.	who holds eac hat type of clain than three nonp per	n it is. Do not list cl riority unsecured o	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
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3. Do any creditors have nonpriority unsecured clair  No. You have nothing to report in this part. Submit  Yes.  4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2.  4.1  Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300  Toledo, OH 43604-1106  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community	this form to the court with your other states alphabetical order of the creditor claim. For each claim listed, identify what reditors in Part 3.If you have more to be also be alphabetical order of the creditor.  Last 4 digits of account number when was the debt incurred?  As of the date you file, the class of the date you file, the class of the date of the class of the class of the date of the class	who holds each hat type of claim than three nonposer  where the claim is: Check all the claim:	n it is. Do not list of riority unsecured of the control of the co	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
3. Do any creditors have nonpriority unsecured clair  No. You have nothing to report in this part. Submit  Yes.  4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2.  4.1  Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300  Toledo, OH 43604-1106  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	this form to the court with your other states alphabetical order of the creditor claim. For each claim listed, identify what reditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4. If you have more to	who holds each hat type of claim than three nonposer  where the claim is: Check all the claim:	n it is. Do not list of riority unsecured of the control of the co	aims already includ laims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
3. Do any creditors have nonpriority unsecured clair  No. You have nothing to report in this part. Submit  Yes.  4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other part 2.  4.1  Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300  Toledo, OH 43604-1106  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?	this form to the court with your other states alphabetical order of the creditor claim. For each claim listed, identify with creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4.If you ha	who holds each hat type of claim than three nonposer  where  sim is: Check all the claim:  wred claim:	n it is. Do not list of riority unsecured of the control of the co	aims already includialims fill out the Co	led in Part 1. If more ontinuation Page of otal claim
3. Do any creditors have nonpriority unsecured clair  No. You have nothing to report in this part. Submit  Yes.  4. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.  4.1  Boyd, Esq., Kenneth E.  Nonpriority Creditor's Name 626 Madison Ave Ste 300  Toledo, OH 43604-1106  Number Street City State Zip Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	this form to the court with your other states alphabetical order of the creditor claim. For each claim listed, identify what reditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 3.If you have more to the creditors in Part 4. If you have more to	who holds each hat type of claim than three nonposer  whim is: Check all the claim: separation agree haring plans, and	n it is. Do not list of riority unsecured of the control of the co	aims already includialims fill out the Co	led in Part 1. If more ontinuation Page of

Schedule E/F: Creditors Who Have Unsecured Claims

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Capital One Bank USA NA	Last 4 digits of account number 9862	\$69
Nonpriority Creditor's Name	2002	φ0:
PO Box 31293	When was the debt incurred? 2021	
Salt Lake City, UT 84131 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that y	you did not
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Credit Card Purchases	
Davis, Esq., Carla B.	Last 4 digits of account number	Unkr
onpriority Creditor's Name 41 N Superior St Ste 200	When was the debt incurred?	
Toledo, OH 43604-1253	A control of the state of the s	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	☐ Contingent	
Debtor 1 only		
Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that v	vou did not
ls the claim subject to offset?	report as priority claims	you ald not
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Legal fees	
Directions Credit Union	Last 4 digits of account number 216L	\$19
Nonpriority Creditor's Name		
200 N. Saint Clair St, Suite 1600 Toledo, OH 43604	When was the debt incurred? 03/2011 to current	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that y	ou did not
Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
No	Lebis to bension or bront-snaring bians, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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Internal Revenue Service Nonpriority Creditor's Name	Last 4 digits of account number	0662		\$14,2
Insolvency Group 6 1240 East Ninth Street, Room 493	When was the debt incurred?	12/31/2013, 12/31/20	115	
Cleveland, OH 44199  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	■ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce t	hat you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar deb	ots	
Yes	Other. Specify 2013 and 2	015 Federal income ta	ax	
Management Service Incorporated	Last 4 digits of account number	1455		\$1,0
Nonpriority Creditor's Name PO Box 1099	When was the debt incurred?	7/23/2020		
Langhorne, PA 19047  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only	☐ Contingent			
_	■ Unliquidated			
Debtor 2 and Debtor 3 and	■ Disputed			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans	<b></b>		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce t	hat you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar deb	ots	
	_ Collection	agent for Exeter Finar	nce LLC	
Yes	Other. Specify account en	ding 5690 Deficiency	balance	
Ohio Bureau of Workers'		1099		\$1
Compensatio Nonpriority Creditor's Name	Last 4 digits of account number			Ψ1
Attn: Law Section Bankruptcy Unit PO Box 15567	When was the debt incurred?	2003-2004		
Columbus, OH 43215  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
Who incurred the debt? Check one.	710 of the date you me, the olding	oncok all that apply		
■ Debtor 1 only	Contingent			
Debtor 2 only	Unliquidated			
☐ Debtor 1 and Debtor 2 only	Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt	Obligations arising out of a sepa	aration agreement or divorce t	hat you did not	
Is the claim subject to offset?	report as priority claims	ag plana, and other similar del	ato.	
No	Debts to pension or profit-sharin		JIS	
☐ Yes		le party of Workers' tion business debt of	Mountain	

Schedule E/F: Creditors Who Have Unsecured Claims

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Ohio Department Of Taxation	Last 4 digits of account number	0662	\$8,
Nonpriority Creditor's Name  Attn: Bankruptcy Division	When was the debt incurred?	2013, 2015	
PO Box 530 Columbus, OH 43266-0001			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□ Yes	Ohio Perso 2013 and 20	nal Income Tax for tax years 015	
Portfolio Recovery Associates LLC	Last 4 digits of account number	4073	\$
Nonpriority Creditor's Name PO Box 12914	When was the debt incurred?		
Norfolk, VA 23541	when was the dest incurred:		
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other Specify Collection	•	
Stultz & Stephan, Ltd	Last 4 digits of account number	etal	\$23,
Nonpriority Creditor's Name	Last 4 digits of account number		Ψ20,
Special Counsel PO Box 400	When was the debt incurred?	2001, 2005, 2006, 2007	
Tiffin, OH 44883  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	■ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	I Dobte to popular or profit charin	g plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Stephen C. DeMascio Case number (if known) 22-30106 4.1 Stultz & Stephan, Ltd 9192 \$7,133.01 Last 4 digits of account number Nonpriority Creditor's Name Special Counsel When was the debt incurred? 3rd Qtr 2004 PO Box 400 **Tiffin, OH 44883** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Potential responsible party for unpaid IFTA business debt of Mountain Star ☐ Yes ■ Other. Specify Transportation Inc. 4.1 Stultz & Stephan, Ltd 5486 \$4,576.97 Last 4 digits of account number Nonpriority Creditor's Name **Special Counsel** When was the debt incurred? 2004 **PO Box 400 Tiffin, OH 44883** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent ■ Debtor 1 only Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Other Specify Star Transportation Inc.

Potential responsible party for unpaid Corporate Franchise Tax debt of Mountain

Official Form 106 E/F

■ No

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

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Name and Address Internal Revenue Service Insolvency Group 3 1240 E 9th St Rm 457 Cleveland, OH 44199-2001

Official Form 106 F/F

On which entry in Part 1 or Part 2 did you list the original creditor?

Line <u>2.2</u> of (Check one): Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 11

Debtor 1 Stephen C. DeMascio		Case number (if known)	22-30106	
	Last 4 digits of account number			
Name and Address Internal Revenue Service PO Box 7346 Philadelphia PA 10114	On which entry in Part 1 or Part 2 did Line <u>4.5</u> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpr		
Philadelphia, PA 19114	Last 4 digits of account number			
Name and Address Internal Revenue Service Insolvency Group 3 1240 E 9th St Rm 457 Cleveland, OH 44199-2001	On which entry in Part 1 or Part 2 did Line <b>2.3</b> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority Part 2: Creditors with Nonpr		
	Last 4 digits of account number			
Name and Address Office of the US Attorney Four Seagate, Third Floor Suite 308 Toledo, OH 43604	On which entry in Part 1 or Part 2 did Line <b>4.5</b> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priority  Part 2: Creditors with Nonpr		
<u> </u>	Last 4 digits of account number			
Name and Address Ohio Attorney General Collections Enforcement Section Attention: Bankruptcy Unit 30 East Broad St., 14th Floor Columbus, OH 43215	On which entry in Part 1 or Part 2 did Line <b>4.10</b> of ( <i>Check one</i> ):	d you list the original creditor?  ☐ Part 1: Creditors with Priority  ☐ Part 2: Creditors with Nonpr		
	Last 4 digits of account number			
Name and Address Ohio Attorney General Collections Enforcement Section Attention: Bankruptcy Unit 30 East Broad St., 14th Floor	On which entry in Part 1 or Part 2 did Line <b>4.11</b> of ( <i>Check one</i> ):	d you list the original creditor?  ☐ Part 1: Creditors with Priority  ☐ Part 2: Creditors with Nonpr		
Columbus, OH 43215	Last 4 digits of account number			
Name and Address Ohio Attorney General Collections Enforcement Section Attention: Bankruptcy Unit 30 East Broad St., 14th Floor Columbus, OH 43215	On which entry in Part 1 or Part 2 did Line <b>4.12</b> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpr		
	Last 4 digits of account number			
Name and Address Ohio Attorney General Collections Enforcement Section Attention: Bankruptcy Unit 30 East Broad St., 14th Floor Columbus, OH 43215	On which entry in Part 1 or Part 2 did Line <u><b>4.13</b></u> of ( <i>Check one</i> ):	d you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpr		
	Last 4 digits of account number			
Name and Address Ohio Department Of Taxation C/O Ohio Attorney General's Office 150 E Gay St 21ST FI Columbus, OH 43215-3130	On which entry in Part 1 or Part 2 did Line 4.8 of ( <i>Check one</i> ):  Last 4 digits of account number	d you list the original creditor?  Part 1: Creditors with Priorit  Part 2: Creditors with Nonpr		
Name and Address Ohio Department Of Taxation Bankruptcy Division 30 E Broad St Columbus, OH 43215-3414	On which entry in Part 1 or Part 2 did Line 4.8 of ( <i>Check one</i> ):  Last 4 digits of account number	d you list the original creditor?  ☐ Part 1: Creditors with Priority  ☐ Part 2: Creditors with Nonpr		
Name and Address	On which entry in Part 1 or Part 2 did	d you list the original creditor?		
Ohio Department Of Taxation Official Form 106 E/F	Line <u>2.5</u> of ( <i>Check one</i> ):  Schedule E/F: Creditors Who Have Unse	ecured Claims		Page 9 of 11

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Debtor 1 Stephen C. DeMascio		Case number (if known)	22-30106
Bankruptcy Division 30 E Broad St Columbus, OH 43215-3414	Last 4 digits of account number	■ Part 1: Creditors with Priori □ Part 2: Creditors with Nonp	
Name and Address Ohio Department Of Taxation C/O Ohio Attorney General's Office 150 E Gay St 21ST FI Columbus, OH 43215-3130	On which entry in Part 1 or Part 2 did Line 2.5 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priori Part 2: Creditors with Nonp	-
Name and Address Ohio Department of Taxation Attn: Bankruptcy Division P.O. Box 530 Columbus, OH 43216-0530	On which entry in Part 1 or Part 2 did Line 4.10 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priori  Part 2: Creditors with Nonp	
Name and Address Ohio Department of Taxation Attn: Bankruptcy Division P.O. Box 530 Columbus, OH 43216-0530	On which entry in Part 1 or Part 2 did Line 4.11 of ( <i>Check one</i> ):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priori Part 2: Creditors with Nonp	
Name and Address Ohio Department of Taxation Attn: Bankruptcy Division P.O. Box 530 Columbus, OH 43216-0530	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priori  Part 2: Creditors with Nonp	-
Name and Address Ohio Department of Taxation Attn: Bankruptcy Division P.O. Box 530 Columbus, OH 43216-0530	On which entry in Part 1 or Part 2 did Line 4.13 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priori  Part 2: Creditors with Nonp	-
Name and Address Stultz & Stephan, Ltd Special Counsel PO Box 400 Tiffin, OH 44883	On which entry in Part 1 or Part 2 did Line 4.8 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Priori Part 2: Creditors with Nonp	
Name and Address Stultz & Stephan, Ltd Special Counsel PO Box 400 Tiffin, OH 44883	On which entry in Part 1 or Part 2 did Line 2.5 of (Check one):  Last 4 digits of account number	you list the original creditor? ■ Part 1: Creditors with Priori □ Part 2: Creditors with Nonp	
Name and Address U.S. Attorney General U.S. Dept. Of Justice Tax Division PO Box 55 Ben Franklin Station Washington, DC 20044-0055	On which entry in Part 1 or Part 2 did Line 2.2 of (Check one):  Last 4 digits of account number	you list the original creditor? ■ Part 1: Creditors with Priori □ Part 2: Creditors with Nonp	-
Name and Address U.S. Attorney General U.S. Dept. Of Justice Tax Division PO Box 55 Ben Franklin Station Washington, DC 20044-0055	On which entry in Part 1 or Part 2 did Line 2.3 of (Check one):  Last 4 digits of account number	you list the original creditor?  ■ Part 1: Creditors with Priori □ Part 2: Creditors with Nonp	
Name and Address U.S. Attorney's Office	On which entry in Part 1 or Part 2 did Line 2.2 of (Check one):	you list the original creditor?	

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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Stephen C. DeMascio		Case number (if known)	22-30106
4 Seagate Ste 308 Toledo, OH 43604-2622		■ Part 1: Creditors with Priori □ Part 2: Creditors with Nonp	
Name and Address U.S. Attorney's Office 4 Seagate Ste 308 Toledo, OH 43604-2622		ou list the original creditor?  Part 1: Creditors with Priori Part 2: Creditors with Nonp	•
	Last 4 digits of account number		

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 21,519.74
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 21,519.74
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 61,339.29
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 61,339.29

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 11

Fill in this infor	mation to identify your	case:		
Debtor 1	Stephen C. DeMa	scio		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number	22-30106			
(if known)				☐ Check if this is an amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

l	Person or	company with	n whom you have the r, Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3	Oity		Oldio	Zii Godc	
0	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	City		Olato	Zii Oodo	
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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Fill in thi	is information to identify your	case:			
Debtor 1	Stephen C. DeMa	ıscio			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, f		Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case nur	mber <b>22-30106</b>				
(if known)					Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
people ar fill it out,	• • • •	ially responsible for supple boxes on the left. Attack	olying correct information the Additional Page (	tion. If more space is ne	eeded, copy the Additional Page, of any Additional Pages, write
1. Do	o you have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
	0				
■ Ye	es				
	ithin the last 8 years, have you ona, California, Idaho, Louisiana				states and territories include
■ No	o. Go to line 3.				
□ Ye	es. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Forn	ne 2 again as a codebtor only i	if that person is a guaran	tor or cosigner. Make	sure you have listed th	y with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1	Sandra L. Demascio			☐ Schedule D, lir	<del></del>
	5023 Borland Drive Sylvania, OH 43560-2611			■ Schedule E/F,	
	•			☐ Schedule G Stultz & Stephar	

Schedule H: Your Codebtors

		_									
	in this information to identi otor 1 Step	hen C. DeMascio									
	otor 2  ouse, if filing)						_				
Uni	ted States Bankruptcy Cou	irt for the: NORTHER	RN DISTRIC	T OF OHIO			_				
	se number 22-30106							Check if this in An amend	ed filing	ng postpetitior	n chapter
$\bigcirc$	fficial Form 106	1						13 income	as of the f	ollowing date:	
	chedule I: You	_						MM / DD/	YYYY		12/15
sup spo atta	as complete and accurate plying correct informatio use. If you are separated ch a separate sheet to the Describe Emple	n. If you are married a and your spouse is r is form. On the top of	and not filir not filing wi	ig jointly, and yo th you, do not in	our spou clude in	ise is Iforn	s living nation a	with you, inc about your sp	lude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your employment information.	t		Debtor 1				Debtor	2 or non-f	iling spouse	
	If you have more than on		nt etatue	■ Employed				☐ Emp	loyed		
	attach a separate page winformation about additio	,,,,,	iii status	☐ Not employe	ed			☐ Not	employed		
	employers.	Occupation	n	Sales & Mark	eting						
	Include part-time, seasor self-employed work.	Employer's	s name	D & D Toolin	g & Mf	g., Ir	nc.				
	Occupation may include or homemaker, if it applies		s address	500 Territoria Bolingbrook		40					
		How long	employed th	nere? 9 Ye	ars						
Par	t 2: Give Details Ab	oout Monthly Income									
	mate monthly income as use unless you are separat		nis form. If y	ou have nothing	to report	for a	any line,	write \$0 in th	e space. In	clude your no	n-filing
	ou or your non-filing spouse e space, attach a separate		employer, co	mbine the informa	ation for	all e	mployer	s for that pers	on on the l	ines below. If	you need
							Fo	r Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wag deductions). If not paid r					2.	\$	10,381.50	\$	N/A	-
3.	Estimate and list month	nly overtime pay.				3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income	Add line 2 + line 3.				4.	\$	10,381.50	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

purchases of gifts and other like items for clients, travel expenses, and entertainment costs for clients.

Debtor averages app. \$11,000.00 per month in commissions. Amount, however, can vary. Incurs on average \$3,000.00 per month in expenses to generate commissions. Such expenses include

Official Form 106l Schedule I: Your Income page 2

Yes. Explain:

Fill	in this informa	tion to identify yo	our case:			Ī			
Deb		Stephen C. D					eck if this		
Deb	tor 2						A supp		ving postpetition chapter
(Spo	ouse, if filing)						13 exp	enses as of t	the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF OH	IIO		MM / D	D/YYYY	
	e number 22 nown)	2-30106							
Of	fficial Fo	rm 106J				-			
S	chedule	J: Your l	Expen	ses					12/1
info	ormation. If m	and accurate as ore space is ne n). Answer ever	eded, atta	If two married people ch another sheet to th	are filing together, b is form. On the top o	oth are ed f any addi	ually res tional pa	ponsible fo ges, write y	r supplying correct our name and case
Par		ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to	line 2. s Debtor 2 live i	in a senar:	ate household?					
	□ res. Doc		ii a sepair	ate nousenoiu:					
	□ Y	es. Debtor 2 mus	st file Officia	al Form 106J-2, <i>Expen</i> s	es for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's related Debtor 1 or Debtor		Dep age	endent's	Does dependent live with you?
	Do not state dependents				Daughter		14		■ No □ Yes
					Son		19		■ No
					3011				☐ Yes ☐ No
									☐ Yes
									□ No □ Yes
3.	Do your exp	enses include		No					□ res
		f people other tl d your depende	han 👝	Yes					
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses					
exp	imate your ex	penses as of yo	our bankru	ptcy filing date unless					pter 13 case to report f the form and fill in the
Incl	lude expense	s paid for with r	non-cash	government assistanc	e if you know				
the		n assistance an		luded it on Schedule I				Your expe	enses
4.		or home owners and any rent for the		ses for your residence r lot.	. Include first mortgag	e 4.	\$		1,718.55
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		469.81
		rty, homeowner's	s, or renter	s insurance		4b.	\$		266.67
		maintenance, re owner's associat	•	pkeep expenses		4c. 4d.	· —		200.00 0.00
5.				our residence, such as	home equity loans	4u. 5.	·		0.00

Debtor 1	Stephen C. DeMa	scio		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:  22-30106	NORTHERN DISTRICT	OF OHIO	
if known)				Check if this is ar amended filing

Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Did	you pay or agree to pay someone who is NOT an attorney to	help	you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
that	or penalty of perjury, I declare that I have read the summary a they are true and correct. s/ Stephen C. DeMascio	and s	chedules filed with this declaration and
•	Stephen C. DeMascio Signature of Debtor 1		Signature of Debtor 2
[	Date <b>February 14, 2022</b>		Date

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Fill in	this info	rmation to identify you	r case:			
Debtor	· 1	Stephen C. DeM				
Debtor	. 2	First Name	Middle Name	Last Name		
(Spouse		First Name	Middle Name	Last Name		
United	States E	Sankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case r	number	22-30106				
(if known	n)					heck if this is an mended filing
		orm 107				
State	emen	t of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
informa	ation. If		attach a separate sheet to		equally responsible for suppy y additional pages, write you	
Part 1		, , , , , ,	arital Status and Where You	ı Lived Before		
1. W	hat is yo	ur current marital statu	ıs?			
	Marrie	ed				
	Not m	arried				
2. Du	uring the	last 3 years, have you	lived anywhere other than	where you live now?		
_	NI-					
_	No Yes. L	ist all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>I</i> .	
D	ebtor 1 l	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory	
states a	and territo	ories include Arizona, Ca	llifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	isconsin.)
_	No					
	Yes. N	Make sure you fill out Scl	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Expl	ain the Sources of You	ır Income			
Fil	I in the to	otal amount of income yo	nployment or from operating use received from all jobs and a have income that you receive	all businesses, including part-		dar years?
П	No					
		Fill in the details.				
			Debter		Daktano	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$9,552.72	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Ohio Department Of Taxation Attn: Bankruptcy Division PO Box 530 Columbus, OH 43266-0001	Monthly Payments of \$500 under payment plan with State of Ohio.	\$1,500.00	\$0.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>■ Other Taxes</li> </ul>

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Case number (if known)

Official Form 107

Debtor 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	Diller and Rice, LLC 1107 Adams St. Toledo, OH 43604 Eric@drlawllc.com	Attorney Fees \$	3,000 Costs \$40	00	12/22/2021	\$1,500.00
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li  No	or to make payments			or transfer any prope	erty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and variansferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus Include both outright transfers and transfers made include gifts and transfers that you have already link No  Yes. Fill in the details.	iness or financial affa e as security (such as t	airs? the granting of a se			
	Person Who Received Transfer Address Person's relationship to you	Description and very property transfer			any property or received or debts change	Date transfer was made
	Unknown	Son's 1997 Mer S240 held in De for insurance p while son resto sell. Son sold v	btor's name urposes res vehicle to	\$2,000		11/2021
19.	Within 10 years before you filed for bankruptce beneficiary? (These are often called asset-protection No  Yes. Fill in the details.		y property to a se	lf-settled tru	ust or similar device	of which you are a
	Name of trust	Description and v	alue of the proper	rty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instru	uments, Safe Deposi	Boxes, and Stora	ige Units		
20.	<del></del>	were any financial acou	counts or instrum	ents held in		
		ast 4 digits of ccount number	Type of account instrument	clo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

21.	Do you now have, or did you have within 1 year l cash, or other valuables?	before you filed for bankruptcy, a	ny safe deposit box or other deposito	ry for securities,
	■ No □ Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or pla		1 year before you filed for bankruptcy?	•
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someor		rtv vou borrowed from, are storing for	or hold in trust
	for someone.	, <b>,</b> , , , , , , , , , , , , , , , , ,	, , ,	,
	□ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
	Son	Debtor's home	Son's 1993 Nissan 240 SX purchased by son for fixing and reslae. Currently inoperable	\$1,600.00
	Son		Son's 2007 BMW 335i purchased for repairs and resale.	\$2,400.00
	Son		Son's 2001 Chevrolet Silverado, 280,000 miles. Son uses for pickup of parts for car repair and resale business.	\$1,000.00
	Son		Son's 2004 Chevrolet Tahoe, titled in Debtor's name for insurance purposes. Son's main vehicle used for transportation to classes; Son is full time student at Owen's Commnity College.	\$2,000.00
	Daughter		Daughter's 2017 Volkswagen Tiguan titled in Debtor's name for insurance purposes. Daughter was a full time college student.	\$20,000.00
Par	10: Give Details About Environmental Informa	tion		

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

Best Case Bankruptcy

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. П Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ■ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Part 12: Sign Below

Name

Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 7

**Date Issued** 

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Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

Best Case Bankruptcy

		ing a false statement, concealing property, or obtaining money or pr ip to \$250,000, or imprisonment for up to 20 years, or both.	roperty by fraud in connection
18 U.S	.C. §§ 152, 1341, 1519, and 3571.		
/s/ St	ephen C. DeMascio		
•	nen C. DeMascio ture of Debtor 1	Signature of Debtor 2	
Date	February 14, 2022	Date	
Did yo	u attach additional pages to Your Sta	ntement of Financial Affairs for Individuals Filing for Bankruptcy (Off	ficial Form 107)?
■ No			
□ Yes			
Did yo	u pay or agree to pay someone who i	is not an attorney to help you fill out bankruptcy forms?	

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case number (if known) 22-30106

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 8

Debtor 1 Stephen C. DeMascio

Fill in this inform	nation to identify your case:
Debtor 1	Stephen C. DeMascio
Debtor 2 (Spouse, if filing)	
United States B	ankruptcy Court for the: Northern District of Ohio
Case number (if known)	22-30106

Check	as directed in lines 17 and 21:
1	ording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

04/20

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

		,		
Part	1: Calculate Your Average Monthly Income			
1.	What is your marital and filing status? Check one	e only.		
	■ Not married. Fill out Column A, lines 2-11.			
	☐ Married. Fill out both Columns A and B, lines 2-1	1.		
10 th	II in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6 e 6 months, add the income for all 6 months and divide the to bouses own the same rental property, put the income from that	6-month period would be March 1 otal by 6. Fill in the result. Do not in	hrough August 31. If the an clude any income amount r	nount of your monthly income varied during more than once. For example, if both
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2.	Your gross wages, salary, tips, bonuses, overtim payroll deductions).	ne, and commissions (before	all \$ <b>10,381.50</b>	\$
3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	ide payments from a spouse if	\$	\$
4.	All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a sport you listed on line 3.	<ul><li>ort. Include regular contribution hold, your dependents, parents</li></ul>	าร	\$
5.	Net income from operating a business, profession, or farm	Debtor 1		
	Gross receipts (before all deductions)	\$ 11,002.21		
	Ordinary and necessary operating expenses	\$ 3,000.00		
	Net monthly income from a business, profession, or farm	\$ 8,002.21 Cop	/ ->\$8,002.21	\$
6.	Net income from rental and other real property	Debtor 1		
	Gross receipts (before all deductions)	\$0.00_		
	Ordinary and necessary operating expenses	-\$0.00		
	Net monthly income from rental or other real property	y \$ 0.00 Copy here	e -> \$ 0.00	\$

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor '	Ste	phen C. DeMascio			Case numb	er ( <i>if knowi</i>	n) <b>22-30106</b>		
					Column A Debtor 1		Column B Debtor 2 c		
7. <b>l</b> i	nterest,	dividends, and royalties			\$	0.00	\$		
8. <b>L</b>	Jnemplo	oyment compensation			\$	0.00	\$		
	he Socia	nter the amount if you contend that the am al Security Act. Instead, list it here: u							
	For yo	ur spouse	\$						
t r c c p c	Pension penefit un penefit un pot includ United St disability, pay paid does not f retired	or retirement income. Do not include an nder the Social Security Act. Also, except de any compensation, pension, pay, annutates Government in connection with a dis, or death of a member of the uniformed sunder chapter 61 of title 10, then include exceed the amount of retired pay to which under any provision of title 10 other than of from all other sources not listed above.	ny amount received that was as stated in the next senter ity, or allowance paid by the ability, combat-related injurervices. If you received any that pay only to the extent the you would otherwise be exchapter 61 of that title.	nce, do e ry or retired hat it ntitled	\$	0.00	<u> </u>		
	Do not in under the under the coronavir crime, a compens Government of a court of a cour	iclude any benefits received under the Solic lide any benefits received under the Solic Federal law relating to the national emerge National Emergencies Act (50 U.S.C. 16 rus disease 2019 (COVID-19); payments a crime against humanity, or international of sation, pension, pay, annuity, or allowance then in connection with a disability, comba a member of the uniformed services. If ne page and put the total below.	cial Security Act; payments gency declared by the Pres 01 et seq.) with respect to t received as a victim of a war domestic terrorism; or e paid by the United States t-related injury or disability,	made sident the ar					
	•				\$	0.00	\$		
	_				\$	0.00	\$		
		Total amounts from separate pages, if any	y.	+	\$	0.00	\$		
	each colu	e your total average monthly income. A umn. Then add the total for Column A to the total for Column between the total for Column A to the total for Column between the total for Column betwee	he total for Column B.	\$1	8,383.71	+ \$		Total avera	nge
12 (	Copy yo	ur total average monthly income from I	line 11.					\$ 18,38	3 71
13.	Calculate	e the marital adjustment. Check one:						Ψ 10,00	<u> </u>
ı	You	ı are not married. Fill in 0 below.							
		ı are married and your spouse is filing with	you. Fill in 0 below.						
		are married and your spouse is not filing							
	Fill i dep Belo	in the amount of the income listed in line 1 endents, such as payment of the spouse's bw, specify the basis for excluding this incustments on a separate page.	11, Column B, that was NOTs tax liability or the spouse's	suppor	t of someo	ne other	than you or you	ır dependents.	
	If th	is adjustment does not apply, enter 0 belo	ow.						
				\$					
		-		\$					
				+\$					
		Total		\$	0.	00	Copy here=>		0.00
14.	Your cu	urrent monthly income. Subtract line 13	from line 12.					\$18,38	3.71
15.		ate your current monthly income for the						¢ 18,38	3 71
	15a. C	Copy line 14 here=>						\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 2

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Best Case Bankruptcy

Debtor 1	Stephen C. DeMascio	Case number (if known)	22-30106	
	Multiply line 15a by 12 (the number of months in a year).		x 12	
15	b. The result is your current monthly income for the year for this part of the	he form	\$ 220	,604.52

Stephen C. DeMascio	Case number (if known)	22-30106
	=	

		the median family income that applies to yo			
16	6a. Fill in	the state in which you live.	ОН		
16	6b. Fill in	the number of people in your household.	2		
	To fir	the median family income for your state and sind a list of applicable median income amounts, actions for this form. This list may also be availa	go online using the link specified in th		66,242.00
17. <b>H</b>		he lines compare?			
	_	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do NO	T fill out Calculation of Your Disposal	ble Income (Official Form 1220	C-2).
1,	7b. ■	Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calculary</b> your current monthly income from line 14 about 15 about 16 a	ation of Your Disposable Income (C		
art 3:	Cal	Iculate Your Commitment Period Under 11 U	.S.C. § 1325(b)(4)		
8. <b>C</b>	ору уои	r total average monthly income from line 11		\$	18,383.71
9. <b>D</b>	educt th	ne marital adjustment if it applies. If you are nat calculating the commitment period under 11 ncome, copy the amount from line 13.	narried, your spouse is not filing with y	you, and you	
19	9a. If the	marital adjustment does not apply, fill in 0 on li	ne 19a.	-\$	0.00
19	9b. <b>Subt</b>	ract line 19a from line 18.		\$_	18,383.71
0. <b>C</b>	alculate	your current monthly income for the year.	Follow these steps:		40.000 =4
20	0a. Copy	/ line 19b		\$	18,383.71
	Multip	ply by 12 (the number of months in a year).		Г	<b>x</b> 12
20	0b. The r	result is your current monthly income for the yea	ar for this part of the form	\$	220,604.52
20	0с. Сору	au the median family income for your state and si	ze of household from line 16c		66,242.00
2	1. <b>How</b>	do the lines compare?			
		Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	ordered by the court, on the top of pa	age 1 of this form, check box 3	s, The commitment
		Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ss otherwise ordered by the court, on	the top of page 1 of this form,	check box 4, The
art 4:	Sig	n Below			
B	y signing	here, under penalty of perjury I declare that the	e information on this statement and in	any attachments is true and c	orrect.
<b>X</b> /	/s/ Step	hen C. DeMascio			
		n C. DeMascio			
	J	e of Debtor 1			
D		oruary 14, 2022 //DD /YYYY			
lf	you ched	cked 17a, do NOT fill out or file Form 122C-2.			
lf	you ched	cked 17b, fill out Form 122C-2 and file it with thi	s form. On line 39 of that form, copy y	your current monthly income fr	om line 14 above.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 4

Debtor 1

			1		
Fill in this i	nformation to	identify your case:			
Debtor 1	Stephen	C. DeMascio			
Debtor 2					
(Spouse, if t	filing)				
United State	es Bankruptcy C	Court for the: Northern District of Ohio			
Case numb	er <b>22-30106</b>		□ Ob a si	le if de le le en enemade d'élèce	
(if known)			Li Checi	k if this is an amended filing	l
Official Ford		culation of Your Disposable Ir	ncome		04/19
To fill out th	is form, you w	ill need your completed copy of <i>Chapter 13 Stateme</i> ial Form 122C-1).	nt of Your Current Monthly	Income and Calculation of	
	•	·		anallala fankalının azarında 16	
space is ne	eded, attach a	ate as possible. If two married people are filing toge separate sheet to this form, Include the line number			
additional p	ages, write you	ur name and case number (if known).			
Part 1:	Calculate You	Deductions from Your Income			
the ques	tions in lines 6	ervice (IRS) issues National and Local Standards for -15. To find the IRS standards, go online using the li e available at the bankruptcy clerk's office.			
expenses	if they are high	ounts set out in lines 6-15 regardless of your actual expe eer than the standards. Do not include any operating exp uct any amounts that you subtracted from your spouse's	enses that you subtracted from	om income in lines 5 and 6 of F	
If your ex	penses differ fro	om month to month, enter the average expense.			
Note: Lin	e numbers 1-4 a	are not used in this form. These numbers apply to inform	ation required by a similar fo	orm used in chapter 7 cases.	
5. <b>The</b>	number of peo	ople used in determining your deductions from inco	ne		
plus	the number of a	people who could be claimed as exemptions on your fe people who could be claimed as exemptions on your fe people who support. This num le in your household.		2	
National	Standards	You must use the IRS National Standards to answ	rer the questions in lines 6-7.		

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National

Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,298,00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

page 1

Case number (*if known*) **22-30106** 

Peop	le w	who are under 65 years of age						
-	7a.	Out-of-pocket health care allowance per person	\$	68				
-	7b.	Number of people who are under 65	X	2				
-	7c.	Subtotal. Multiply line 7a by line 7b.	\$	136.00	Copy here	=> \$	136.00	-
Peop	le w	who are 65 years of age or older						
-	7d.	Out-of-pocket health care allowance per person	\$	142				
-	7e.	Number of people who are 65 or older	X	0				
-	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here:	=> \$	0.00	-
-	7g.	Total. Add line 7c and line 7f			\$136.00_		Copy total here:	=> \$ 136.00
.oca	l Sta	andards You must use the IRS Local Standards	to answe	er the questio	ns in lines 8-15.			
		n information from the IRS, the U.S. Trustee Protect purposes into two parts:	gram ha	as divided th	e IRS Local Standa	rd for	housing for	
■ на	ousi	ing and utilities - Insurance and operating expe	nses					
		ing and utilities - Mortgage or rent expenses						
■ Ho Fo ar	ารพ	ver the questions in lines 8-9, use the U.S. Trusto					using the link	specified in the
Ho Γο ar sepa	nsw rate Hou		be availa enses: l	able at the ba	ankruptcy clerk's o mber of people you e	ffice.	J	•
Ho To ar sepa β. Ι	nswerate Hou in th	er the questions in lines 8-9, use the U.S. Trusto e instructions for this form. This chart may also using and utilities - Insurance and operating exp	be availa enses: l	able at the ba	ankruptcy clerk's o mber of people you e	ffice.	J	•
Horo are separate in the separ	nswerate Hou in th	rer the questions in lines 8-9, use the U.S. Truste e instructions for this form. This chart may also using and utilities - Insurance and operating exp ne dollar amount listed for your county for insurance	be availatenses: less and ope	able at the bad Using the nunerating expens	ankruptcy clerk's o nber of people you e ses.	ffice.	J	•
Ho Fo ar separ B.   i	rate Hou in th Hou 9a.	rer the questions in lines 8-9, use the U.S. Trusted instructions for this form. This chart may also using and utilities - Insurance and operating expanse dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5,	be availabenses: It and open fill in the es.	able at the bate Jsing the nunerating expense dollar amour	ankruptcy clerk's on the sound of the sound of the sound of the sees.	ffice. entered	in line 5, fill	•
Ho Fo ar separ B.   i	rate Hou in th Hou 9a.	rer the questions in lines 8-9, use the U.S. Trusted instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.	be availatenses: It and open fill in the es. and other and other add all an	able at the batter than the parting expension dollar amount of the parting expension of the parting and the parting at the par	ankruptcy clerk's on the ses.  The session of people you esses.  The session of t	ffice. entered	in line 5, fill	•
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Horo arranged Horos Horo	nswerrate Hou in th Hou 9a. 9b.	rer the questions in lines 8-9, use the U.S. Truster instructions for this form. This chart may also using and utilities - Insurance and operating expine dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses:  Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses.  Total average monthly payment for all mortgages.  To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.  Name of the creditor  Servicing Corporation  9b. Total average monthly payment of the mortgage or rent expense.  Subtract line 9b (total average monthly payment) of the servicing expense.	be availatenses: It and open fill in the ess.  and other ess.	able at the bad Jaing the numerating expense dollar amour ar debts secur mounts that are safter you fill a safter you fi	ankruptcy clerk's on the people you esses.  Intered by your home.  I	ffice. entered	916.00 1,718.55 0.00 Copy	5 Repeat this amour on line 33a.

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

Debtor 1	Steph	nen C. DeMascio			Case numb	er ( <i>if known</i> )	22-3	80106	
11.	Local tra	ansportation expenses: Check the number of vehic	cles for which	ch you claim a	an owner	ship or ope	rating	expense.	
	□ 0. Go	to line 14.							
	■ 1. Go	to line 12.							
	□ 2 or m	nore. Go to line 12.							
12.		operation expense: Using the IRS Local Standards gexpenses, fill in the Operating Costs that apply for							188.00
13.	You may	ownership or lease expense: Using the IRS Local not claim the expense if you do not make any loan n two vehicles.							
Vel	nicle 1	Describe Vehicle 1: 2014 Chevrolet Travers	se LTZ 15	0,000 miles					
13a.	Ownersh	ip or leasing costs using IRS Local Standard			\$	521.	00		
		monthly payment for all debts secured by Vehicle 1.			. –				
	Ū	clude costs for leased vehicles.							
	are contr	ate the average monthly payment here and on line a actually due to each secured creditor in the 60 mont cy. Then divide by 60.	,		t				
	Nan	ne of each creditor for Vehicle 1	Average payment	-					
	Chi	rysler Capital	\$	91.83					
		Total Average Monthly Payment	\$	91.83	Copy here =>	· -\$	91.	Repeat this amount on line 33b.	
13c.		cle 1 ownership or lease expense line 13b from line 13a. if this number is less than \$0	, enter \$0.		\$_	429.	17_	Copy net Vehicle 1 expense here => \$	429.17
Vel	nicle 2	Describe Vehicle 2:							
13d.	Ownersh	ip or leasing costs using IRS Local Standard			\$	0.	00		
13e.	Average leased ve	monthly payment for all debts secured by Vehicle 2. ehicles.	. Do not inc	lude costs for					
	Nan	ne of each creditor for Vehicle 2	Average payment	•					
			\$						
		Total average monthly payment	\$		Copy here => -\$		0.00	Repeat this amount on line 33c.	
13f.		cle 2 ownership or lease expense line 13e from line 13d. if this number is less than \$0	, enter \$0.		\$_	0.	.00	Copy net Vehicle 2 expense here => \$	0.00
14.		ransportation expense: If you claimed 0 vehicles					, fill in	the \$	0.00
15.		al public transportation expense: If you claimed	•	•	•		that yo	ou may	

**Chapter 13 Calculation of Your Disposable Income** 

also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

page 3

0.00

\$

Oth	ln addition to the expense deduction to the ex	ons listed above,	you are allowed your monthly expenses	for	
16.	Taxes: The total monthly amount that you will actually pay for self-employment taxes, social security taxes, and Medicare tax your pay for these taxes. However, if you expect to receive a tand subtract that number from the total monthly amount that is	kes. You may inc ax refund, you m	lude the monthly amount withheld from ust divide the expected refund by 12		
	Do not include real estate, sales, or use taxes.	. ,		\$	3,842.79
17.	Involuntary deductions: The total monthly payroll deductions contributions, union dues, and uniform costs.  Do not include amounts that are not required by your job, such		•	\$	0.00
18	<b>Life Insurance:</b> The total monthly premiums that you pay for y	•	.,	_	
10.	filing together, include payments that you make for your spous Do not include premiums for life insurance on your dependents of life insurance other than term.	e's term life insu	ance.	\$	0.00
19.	Court-ordered payments: The total monthly amount that you administrative agency, such as spousal or child support payments.		by the order of a court or		
	Do not include payments on past due obligations for spousal o		ou will list these obligations in line 35.	\$	752.35
20.	Education: The total monthly amount that you pay for education	on that is either r	equired:		
	as a condition for your job, or		•		
	for your physically or mentally challenged dependent child i	f no public educa	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly amount that you pay for childcare	e, such as babys	itting, daycare, nursery, and preschool.		0.00
	Do not include payments for any elementary or secondary school	ool education.		\$	0.00
22.	Additional health care expenses, excluding insurance cos that is required for the health and welfare of you or your depen by a health savings account. Include only the amount that is m	dents and that is	not reimbursed by insurance or paid		
	Payments for health insurance or health savings accounts sho	uld be listed only	in line 25.	\$	0.00
23.	Optional telephone and telephone services: The total month for you and your dependents, such as pagers, call waiting, call phone service, to the extent necessary for your health and well income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet are expenses, such as those reported on line 5 of Official Form 12.	er identification, fare or that of you	special long distance, or business cell ur dependents or for the production of vice. Do not include self-employment	+\$	0.00
24.	Add all of the expenses allowed under the IRS expense all Add lines 6 through 23.	lowances.		\$	7,240.31
Δda	ditional Expense Deductions These are additional deduction	one allowed by th	e Means Test		
Auc	Note: Do not include any exp				
25.	Health insurance, disability insurance, and health savings insurance, disability insurance, and health savings accounts the your dependents.			r	
	Health insurance \$	624.83			
	Disability insurance \$	0.00			
	Health savings account +\$	0.00			
	Total \$_	624.83	Copy total here=>	\$	624.83
	Do you actually spend this total amount?		J		
	□ No. How much do you actually spend?				
	■ Yes \$				
26.	Continued contributions to the care of household or family continue to pay for the reasonable and necessary care and support household or member of your immediate family who is un	pport of an elderl	y, chronically ill, or disabled member of		
	include contributions to an account of a qualified ABLE program			\$	0.00
27.	<b>Protection against family violence.</b> The reasonably necessal safety of you and your family under the Family Violence Prevent				
	By law, the court must keep the nature of these expenses conf	fidential.		\$	0.00

**Chapter 13 Calculation of Your Disposable Income** 

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Best Case Bankruptcy

Debtor 1	Stephen C. DeMascio		Case number (if ki	nown)	22-	30106			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insural	nce and opera	ating	expens	es on			
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy cergy costs	costs included	in ex	penses	s on line	)		
	You must give your case trustee document amount claimed is reasonable and necessary		st show that th	he ad	ditiona	I	\$		0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.								
	You must give your case trustee document claimed is reasonable and necessary and r		st explain why	y the a	amoun	t			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or	r after the date	e of a	djustm	ent.	\$		0.00
	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS National Standards							
	To find a chart showing the maximum addit instructions for this form. This chart may also			sepa	rate				
	You must show that the additional amount of	claimed is reasonable and necessary.					\$		0.00
	11. <b>Continuing charitable contributions.</b> The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).								
	Do not include any amount more than 15%	of your gross monthly income.					\$		0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.					\$_	(	624.83
Ded	uctions for Debt Payment								
33. <b>F</b>	For debts that are secured by an interest pans, and other secured debt, fill in lines		ne mortgages	s, veh	nicle				
Т	o calculate the total average monthly paymereditor in the 60 months after you file for ba	ent, add all amounts that are contractually	due to each s	secure	ed				
	Mortgages on your home						Aver	age mo	nthly
33a.	Copy line 9b here					=>	\$		18.55
	Loans on your first two vehicles								
33b.	Copy line 13b here					=>	\$	9	91.83
33c.	0 " 10 1						\$		0.00
33d.	List other secured debts:								
	e of each creditor for other secured debt	Identify property that secures the debt		incl	es payn ude tax nsuranc	es			
					No				
	-NONE-				Yes		\$		
				_			<b>–</b>		
					No				
					Yes		\$		
					No				
					Yes	+	\$		
							· _		
33e	Total average monthly payment. Add lines	33a through 33d	\$	1,81	0.38	Copy total here=	_	1,8	310.38

Chapter 13 Calculation of Your Disposable Income

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		ne 33 secured by your primour support						
☐ No.	Go to line 35.							
■ Yes.		u must pay to a creditor, in accossession of your property (continuation below.						
Name of the	creditor	Identify property that secu	res the debt	Т	otal cure amount		onthly mount	cure
Ohio Atto	orney General	5119 Franciscan Blv 43560-2865 Lucas C Legal: Lot number 2 Place, a Subdivision Sylvania, Lucas Cou accordance with Vol page 51. Parcel No. 8215067; 5119 Franciscan Blv	ounty 1 in Convent in the City of nty, Ohio, in ume 59 of Plats, Assessor's V	\$	31,883.44	÷60 = \$		531.39
Servicing	) Corporation	43560-2865 Lucas C Legal: Lot number 2 Place, a Subdivision Sylvania, Lucas Cou accordance with Vol page 51. Parcel No. 8215067;	ounty 1 in Convent in the City of nty, Ohio, in ume 59 of Plats,	\$ - \$	63,188.87	÷60 = \$ ÷60 = +\$		1,053.15
		such as a priority tax, child	support, or alimon	otal \$		Copy total here=>	<b>\$</b>	1,584.54
_		of your bankruptcy case? 1	1 U.S.C. § 507.					
☐ No. ■ Yes.	Go to line 36.	all of those priority claims. De	not include current	or				
■ res.		all of these priority claims. Do uch as those you listed in line due priority claims		\$	21,519.74	÷ 60	\$	358.6
6. Projecte	ed monthly Chapter 13 pla			\$	4,195.28	_	· —	
Office of the Exec To find a l	the United States Courts (f cutive Office for United State list of district multipliers that inc	stated on the list issued by to districts in Alabama and Nes Trustees (for all other distributes your district, go online using the may also be available at the base.	orth Carolina) or by icts). g the link specified in th	X		_		
Average	monthly administrative exp	ense			\$390.16	Copy tota here=>	\$ 	390.1
	of the deductions for del es 33e through 36.	ot payment.					\$	4,143.75
Total Deduc	ctions from Income							
88. Add all	of the allowed deductions	i.						
	ne 24, All of the expenses are allowances	allowed under IRS	\$ 7,24	0.31				
Copy lir	ne 32, All of the additional e		\$62	4.83				
Copy lir	ne 37, All of the deductions	for debt payment	+\$ 4,14	3.75				
Total de	eductions		\$ 12,00	8.89	Copy total here=	>	\$	12,008.8

**Chapter 13 Calculation of Your Disposable Income** 

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Best Case Bankruptcy

Part 2:	Determine You	ır Disposable Income Under 11 U.S.C. §	1325(b)	(2)				
		rent monthly income from line 14 of For Current Monthly Income and Calculation			d		\$	18,383.71
<b>child</b> ı disabi receiv	ren. The monthlility payments for ed in accordance	ly necessary income you receive for surely average of any child support payments, or a dependent child, reported in Part I of Foce with applicable nonbankruptcy law to the nded for such child.	foster ca orm 122	re payments, or C-1, that you		\$	0.00	
emplo in 11 l	oyer withheld fro	etirement deductions. The monthly total of m wages as contributions for qualified reti (7) plus all required repayments of loans from \$362(b)(19).	irement p	lans, as specifie	d	\$	0.00	
42. Total	of all deductio	ns allowed under 11 U.S.C. § 707(b)(2)(	<b>A).</b> Copy	line 38 here	=>	\$ 12,008	8.89	
exper their e	nses and you ha expenses. You r	al circumstances. If special circumstance ave no reasonable alternative, describe the must give your case trustee a detailed explocumentation for the expenses.	e special	circumstances a	ind			
Describe	the special cir	cumstances		Amount of exp	ens	е		
_				S				
_				S		_		
				S		_		
		То	otal \$_	0.00		Copy nere=>\$	0.00	
44. Total	adjustments. /	Add lines 40 through 43.		=>	\$_	12,008.89	Copy here=> -\$	12,008.89
45. <b>Calc</b> u	ılate your mon	thly disposable income under § 1325(b)	<b>)(2).</b> Subt	tract line 44 from	line	39.	\$	6,374.82
Part 3:	Change in Inco	ome or Expenses						
have time y you fil	changed or are your case will be led your petition	or expenses. If the income in Form 122C-virtually certain to change after the date you open, fill in the information below. For exall, check 122C-1 in the first column, enter like in when the increase occurred, and fill in the	ou filed y ample, if ine 2 in th	our bankruptcy p the wages report ne second column	etition ted in n, ex	on and during the ncreased after		
Form	Line	Reason for change		Date of chang	je	Increase or decrease?	Amount of c	hange
☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-1 ☐ 122C-2 ☐ 122C-2 ☐ 122C-1	·					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Increase	\$ \$	
☐ 122C-2						Decrease	\$	

**Chapter 13 Calculation of Your Disposable Income** 

page 7

Debtor 1 Stephen C. DeMascio	Case number ( <i>if known</i> ) 22-30106	
Debitor 1 Otephien C. Demascio	Case Humber (II MIOWII) 22-30100	

Part 4:	Sign	<b>Below</b>

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Stephen C. DeMascio

Stephen C. DeMascio Signature of Debtor 1

Date **February 14, 2022** 

MM / DD / YYYY

Official Form 122C-2

**Chapter 13 Calculation of Your Disposable Income** 

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Ch	apter 7:	Liquidation	
	\$245	filing fee	
	\$78	administrative fee	
<u>+</u> _	\$15	trustee surcharge	
	\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$571 administrative fee \$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
_	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court Northern District of Ohio

In re	Stephen C. DeMascio		Case No.	22-30106
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR DE	BTOR(S)
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filinger rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy, o	r agreed to be paid t	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,000.00
	Prior to the filing of this statement I have received		\$	1,500.00
	Balance Due			1,500.00
2. 7	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person u	nless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy ca	ase, including:
l	a. Analysis of the debtor's financial situation, and rendo. Preparation and filing of any petition, schedules, start. Representation of the debtor at the meeting of credit d. [Other provisions as needed]  Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on home	tement of affairs and plan which r ors and confirmation hearing, and reduce to market value; exer ons as needed; preparation a	nay be required; any adjourned hear nption planning;	ings thereof; preparation and filing of
<b>6.</b> ]	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement for p	ayment to me for re	presentation of the debtor(s) in
F	ebruary 14, 2022	/s/ Eric R. Neuman		
$\overline{D}$	ate	Eric R. Neuman 00	69794	
		Signature of Attorney Diller and Rice, LL	С	
		1107 Adams St.		
		Toledo, OH 43624	. 440 044 0500	
		419-244-8500 Fax Eric@drlawllc.com		
		Name of law firm		

### United States Bankruptcy Court Northern District of Ohio

In re	Stephen C. DeMascio		Case No.	22-30106
		Debtor(s)	Chapter	13
	VERIFI	CATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verifies that	the attached list of creditors is true and	correct to the best	of his/her knowledge.
Date:	February 14, 2022	/s/ Stephen C. DeMascio		
		Stenhen C. DeMascio		

Signature of Debtor